

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF

Jesse Alvin Coleman

DEFENDANT

Tom Dart, et al.

COURT CASE NUMBER

08C2108 08c 2108

TYPE OF PROCESS

S/C

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Thomas Snooks, Superintendent, Cook County Department of Corrections

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

CCJ, C/O Legal Dept. 2700 S. California Ave., 2nd Flr. Div.5, Chicago, IL 60608

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Jesse Alvin Coleman, #2006-0092250

Cook County Jail

P.O. Box 089002

Chicago, IL 60608

Number of process to be
served with this Form - 285

1

Number of parties to be
served in this case

3

Check for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All
Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

FILED
MAY 18 2008 NF
MAY 13 2008
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

XX PLAINTIFF

DEFENDANT

TELEPHONE NUMBER

DATE

05-01-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.(Sign only first USM 285 if more
than one USM 285 is submitted)

Total Process

3 of 3

District
of Origin

No. 24

District
to Serve

No. 24

Signature of Authorized USMS Deputy or Clerk

Td

Date

05-01-08

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Officer Ronna Fernandez

Address (complete only if different than shown above)

☐ A person of suitable age and dis-
cretion then residing in the defendant's
usual place of abode.

Date of Service

5/08/08

Time

11:00

pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee

96.00

Total Mileage Charges
(including endeavors)

7.76

Forwarding Fee

0

Total Charges

103.76

Advance Deposits

0

Amount owed to U.S. Marshal or

103.76

Amount of Refund

0

REMARKS:

1-DUSM 16-miles
2-Hours